the History of Ischemic Heart Disease. In only six pages is distilled our knowledge of IHD from Hippocrates to Frank Wilson

Part two encompasses Some Etiologic and Epidemiologic Considerations. Methods of Examination come in for a lucid evaluation, in which the importance of eliciting a detailed history from the patient is constantly emphasized. Part four deals with Physiology and Pathophysiology. Part five discusses Some General Aspects of Prevention and Treatment. The postulation of atherogenesis vs. thrombogenesis as the basic mechanism in myocardial infarction is thoughtfully presented. The debate about oral anticoagulants for short or long periods and coumarin vs. heparin is reported sans prejudice. Part six is devoted to Angina Pectoris.

In 73 pages, Harrison concentrates his years of experience with the diagnosis of chest-pain. This section alone is worth the price of the book and will be a vade mecum when a patient with obscure chest-pain makes his appearance. A chapter on Myocardial Infarction logically follows, introduced by appropriate Historical Landmarks. Problems of Faints and Spells is explored in 13 pages of wisdom. The uncertainties of prognosis precedes the Surgical Treatment of IHD. Wondrous to read is the last chapter, Management of Apprehension.

This is a very personal book in that it reflects the authors' personal experience with IHD patients. Fact is neatly distinguished from hypothesis by printing the latter in smaller type. When the authors have had no experience with a drug, they say so, as in the case of furosemide (p. 395). Since this is a highly personal book, the authors' opinions are not disguised. In angina of mitral stenosis, Paul Wood's concept is ignored. Although the section dealing with precordial movements is exceptionally complete, the importance of the pulmonic closure sound is neglected (p. 383). The efficient Holter monitor for catching suspected arrhythmias is not used (p. 176, 411). In the prognosis of acute myocardial infarction, the peak of sgot elevation is disregarded (p. 424). That complete heart block can appear intermittently despite a normal PR interval as a cause of faints and spells is not mentioned (Arch. Gen. Psychiat. 18: 112, 1968). The criteria for the diagnosis of ventricular tachycardia are very loose (p. 175). Lipoprotein-typing is not discussed.

A few errors merit correction in a new printing. In Table 5-2, the blood pressure in coarctation of the aorta is said to be "high in the legs, low in the arms." Methoxamine is advised in the text for the drug-tray, but is not listed in Table 20-2. In this same table, the dose of isoproterenol is lacking mgm after the numerals. The directions in the Appendix are for patient 19 not patient 9 (p. 408). Death from crucifixion is said to be caused by postural hypotension; Burch makes a better case for respiratory failure. Optical is printed instead of optional (p. 430).

This evaluation might have been guessed from the names on the title-page. The late Alfred Blalock named as his life's major beneficent influence Tinsley Harrison (while they were both at Vanderbilt). The *Principles of Internal Medicine*, conceived by Harrison, made obsolete the smorgasbord-type textbook of medicine and pushed teaching from the podium to the bedside.

Edward Shapiro, M.D.

A TECHNIQUE FOR EXTRACORPOREAL CIRCULATION—Raymond C. Stofer, D.V.M., In charge of extracorporeal circulation for the Norman E. Shumway Heart Surgery Team; Research Associate, Division of Cardiovascular Surgery, Stanford University School of Medicine, Palo Alto, California. Foreword by Norman Shumway, M.D., Chief, Division of Cardiovascular Surgery, Professor of Surgery, Stanford University School of Medicine, Palo

Alto, California. Charles C Thomas, Publisher, 301-327 East Lawrence Avenue, Springfield, Ill. (62703), 1968. 115 pages, \$6.75.

This monograph, written as a primer in the preparation and assembly of heart-lung equipment and in the conduction of extracorporeal circulation, will be of interest to both the neophyte heart-lung and experienced bypass technician. Although didactic in its content and often cookbook in its format, the book portrays both graphically and interestingly the author's ten years' experience with cardiopulmonary bypass, his philosophy toward training of technicians, and exemplifies his personal devotion toward development of this technique into an art and a craft.

Chapters in this book include segments of extracorporeal circulation support procedures often forgotten in more major surveys of this field such as "What Can Go Wrong?", The Processing Technique of Equipment, and Suppliers of Custom Built Accessories.

The book is, therefore, recommended for those individuals concerned with either the training of cardiopulmonary technicians or operators of experience who wish to review the author's basic and applied approach to this often neglected segment of cardiac surgery.

EDWARD J. HURLEY, M.D.

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THE CARE OF THE RHEUMATOID HAND—Second Edition—Adrian E. Flatt, M.A., M.D., F.R.C.S., F.A.C.S., Professor of Orthopedic Surgery, University of Iowa, Iowa City, Iowa; Hunterian Professor of Royal College of Surgeons of England; Civilian Consultant to U.S. Air Force in Hand Surgery; Past President, Midwestern Association of Plastic Surgeons. With Foreword by Russell L. Cecil, M.D. The C. V. Mosby Company, 3207 Washington Boulevard, St. Louis, Mo. (63103), 1968. 234 pages, \$14.00

In new fields of surgery changes often occur quite rapidly and when the information is published in book form, an early revision bringing the text up to date reflects the interest and devotion of the author to his subject. Such is the case in the Care of the Rheumatoid Hand by Dr. Flatt. Not only has the material in the previous edition been reviewed and updated but a new chapter has been added on the results of surgery for this condition.

Dr. Flatt has long been deeply interested and concerned in this problem and has been a leader in this work in this country. His text not only reflects and records his opinions and procedures but also incorporates that of importance from other investigators, not only here but in the major European clinics dealing with this subject. The text is carefully planned, well written, well illustrated, and divided in chapters to specifically cover the particular phases under consideration. The chapters on the general principles of care and on the nonoperative treatment are particularly significant to those who would undertake this type of surgery. The text is probably the most concise, and the best assessment of the care and the surgery of the rheumatoid hand that is available to date.

The publication of the results of the various types of surgery is highly commendable and enlightening.

Although this book is undoubtedly primarily designed for surgeons, it is to be highly recommended to internists and rheumatologists as well since these men are the ones to first see the beginning ravages of this most debilitating condition.

In reading the text through one cannot fail to recognize the important role that judicious surgery can play in all phases of rheumatoid arthritis as it affects the hands.

L. D. HOWARD, JR., M.D.